ENCROACHMENT PERMIT WORKSHEET CITY OF HAYWARD

Taken by	Date	Permit No	
Owner		Phone	
Address	City	State	Zip
Contractor Name		Phone	
Address	City	State	Zip
Contact Person's Name	Pho		ne
Applicant	Phone		
Contractor's License No.	CLAS	SS	Permit Fee \$
City Business License (Tax ID No.)		
Address for location of work:			
Description of work: or(attach plan	s and details)		